

PROJECT 10073 RECORD CARD

1. DATE 6 December 1963	2. LOCATION Ashland, Kentucky	12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input checked="" type="checkbox"/> Was Aircraft <input checked="" type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown			
3. DATE-TIME GROUP Local 0400AM 06/1000Z GMT	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Air-Visual	5. SOURCE Civilian	6. NUMBER OF OBJECTS 1	7. LENGTH OF OBSERVATION 5 -6 Minutes	8. COURSE N-SE
10. BRIEF SUMMARY OF SIGHTING Dark colored sphere with ray like ring in flight to SE. Sound like faint train. Like egg or oval. Drawing indicates erratic path. Speed estimated 750-850MPH.			11. COMMENTS Possible ECHO or possible A/C. ECHO schedule not available. More likely a/c with ray effect attributed to atmospheric conditions. <u>Insufficient data for firm conclusion.</u> COMMITTEE REGARDS AS IF C		

SAF-OIPB/H.Gaiger/75630/17Dec63

Dear [REDACTED]

The Office of the President has asked the Air Force to reply to your letter concerning your sighting of an Unidentified Flying Object over Ashland, Kentucky on December 6, 1963.

Inclosed is an official questionnaire "U.S. Air Force Technical Information" form FTD 164. If you would complete the questions in this form and return it to this Headquarters, the Air Force will attempt to evaluate your sighting and advise you of the results.

Thank you for advising us regarding this report.

Sincerely,

C. R. CARLSON
Colonel, USAF
Deputy Chief
Public Information Division
Office of Information

1 Attachment
Form 164 with envelope

Mr. [REDACTED]

Ashland, Kentucky

COORDINATED BY (Initials) [REDACTED]

SUPERVISOR (Initials) [REDACTED]

DEC 18 1963

316 Am 5 Dec
No Am Reports in S 20 Se
NOT RECALL

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?	2. Time of day: <u>4</u> <u>?</u> Hour Minutes	
<u>6</u> December 1963 Day Month Year	(Circle One): <u>A.M.</u> or <u>P.M.</u>	
3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other	(Circle One): a. Daylight Saving b. Standard	
4. Where were you when you saw the object? <u>Asiland Ky.</u> Nearest Postal Address	<u>Asiland</u> City or Town	<u>Boyd</u> State or County
5. How long was object in sight? (Total Duration)	<u>60</u> <u>?</u> Hours Minutes Seconds	
a. Certain b. Fairly certain	c. Not very sure d. Just a guess	
5.1 How was time in sight determined? <u>Clock</u>		
5.2 Was object in sight continuously? Yes <u> </u> No <u>✓</u>		
6. What was the condition of the sky?		
DAY a. Bright b. Cloudy	NIGHT a. Bright b. Cloudy	
7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?		
(Circle One): a. In front of you b. In back of you c. To your right	d. To your left e. Overhead f. Don't remember	

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

it was a dark colored object.

12. The edges of the object were:

(Circle One):

- a. Fuzzy or blurred
- b. Like a bright star
- c. Sharply outlined
- d. Don't remember

- e. Other sphere shape
- _____
- _____
- _____

13. Did the object:

(Circle One for each question)

a. Appear to stand still at any time?	Yes	<input checked="" type="radio"/>	Don't know
b. Suddenly speed up and rush away at any time?	Yes	<input checked="" type="radio"/>	Don't know
c. Break up into parts or explode?	Yes	<input checked="" type="radio"/>	Don't know
d. Give off smoke?	Yes	<input checked="" type="radio"/>	Don't know
e. Change brightness?	Yes	<input checked="" type="radio"/>	Don't know
f. Change shape?	Yes	<input checked="" type="radio"/>	Don't know
g. Flash or flicker?	Yes	<input checked="" type="radio"/>	Don't know
h. Disappear and reappear?	Yes	<input checked="" type="radio"/>	Don't know

14. Did the object disappear while you were watching it? If so, how?

I don't know because there were no clouds.

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind:

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what in front of:

17. Tell in a few words the following things about the object:

a. Sound like the faint sound of a train.
 b. Color black or gray

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

2
3

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



it had a hay like things around it.

20. Do you think you can estimate the speed of the object?

(Circle One) Yes No

IF you answered YES, then what speed would you estimate? _____

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes No

IF you answered YES, then how far away would you say it was? 750 to 850 mph.

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other in our yard

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other subdivision

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North	c. East	e. South	g. West
b. Northeast	d. Southeast	f. Southwest	h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

25. Did you observe the object through any of the following?

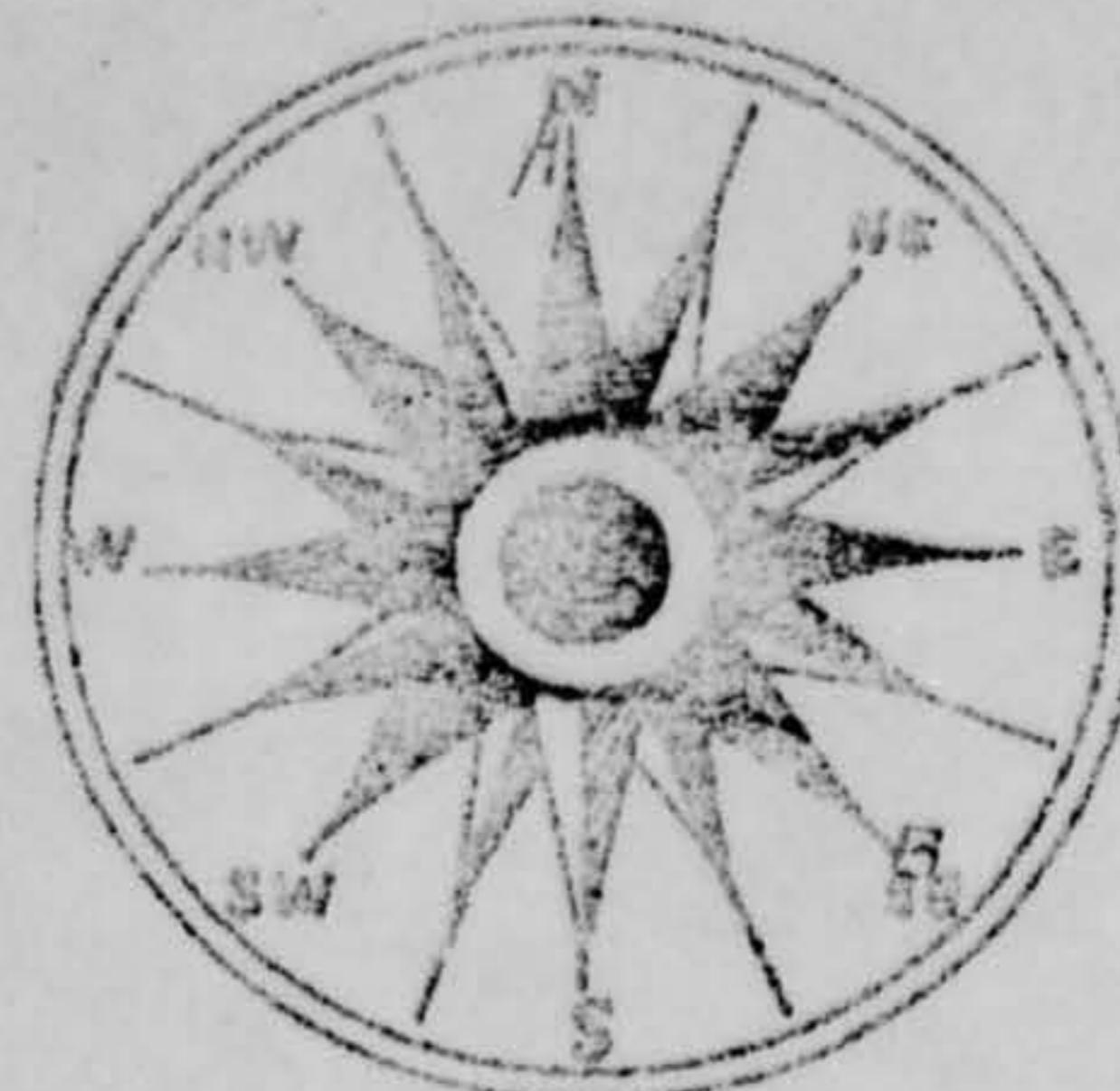
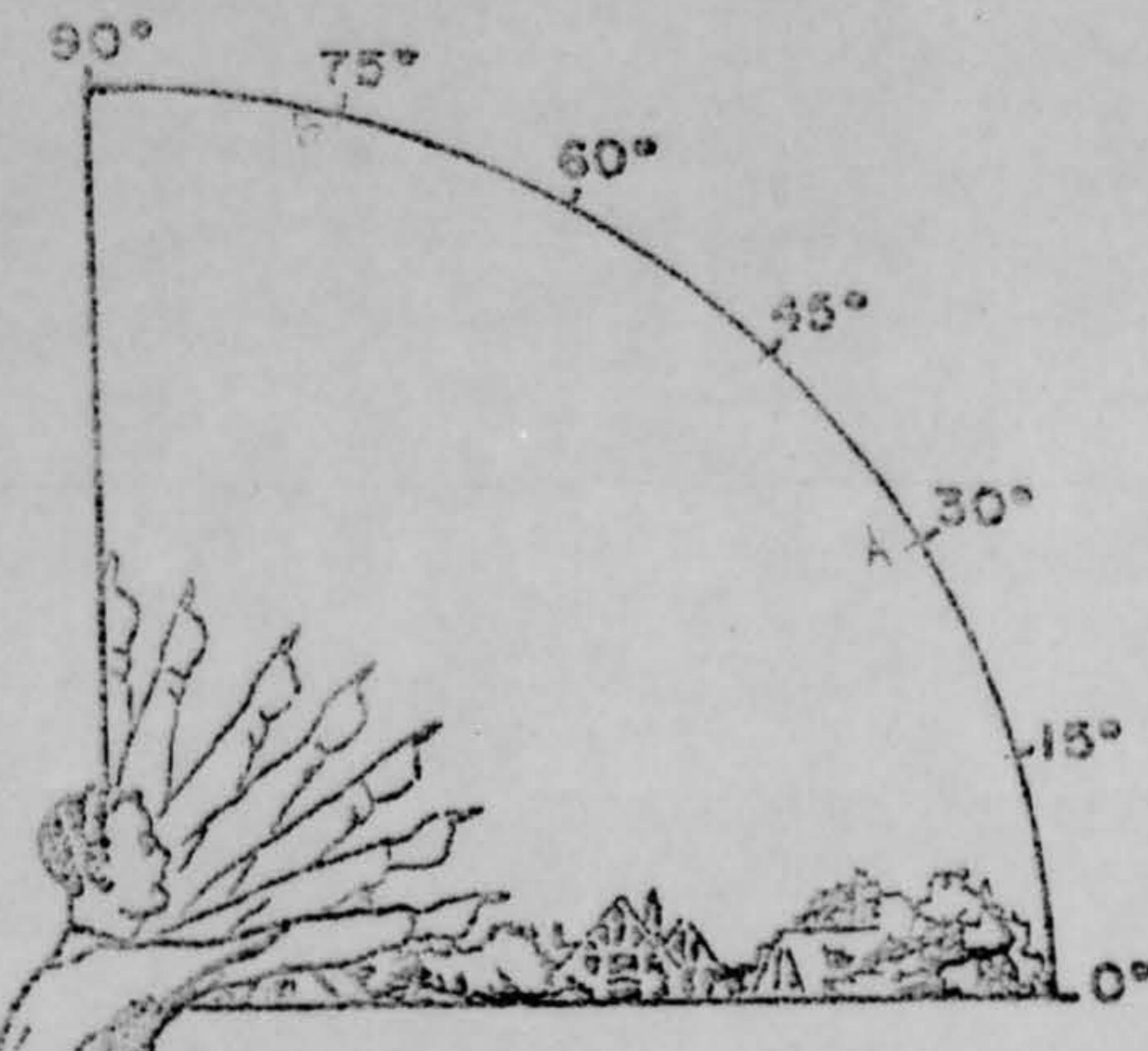
a. Eyeglasses <u>were glasses</u>	Yes	No	e. Binoculars	<input checked="" type="radio"/> Yes	No
b. Sun glasses	Yes	<input checked="" type="radio"/> No	f. Telescope	Yes	<input checked="" type="radio"/> No
c. Windshield	Yes	<input checked="" type="radio"/> No	g. Theodolite	Yes	<input checked="" type="radio"/> No
d. Window glass	Yes	<input checked="" type="radio"/> No	h. Other		

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you

CB

oval

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there?

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One) Yes No

31.1 IF you answered YES, did they see the object too? (Circle One) Yes No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME _____

ADDRESS

Singer

City

1

102

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

I am farsighted (not to much)

(farsighted means we have an eye doctor).

33. When and to whom did you report that you had seen the object?

4

December 1953

Month

Year

The Cuckoo and
Manding with Showed
the Egg perfect, Crystallized
(and somewhat shrivelled) ~~as~~ as it is

34. Date you completed this questionnaire:

31 December 1963

Day

Month

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.